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ABSTRACT

This report describes a project to promote independent-living outreach services that are culturally relevant for American Indians and Alaska Natives with severe or significant disabilities. A pilot training workshop conducted in Aztec, New Mexico, focused on the importance of service providers understanding American Indian culture and on independent-living strategies for outreach. At the close of the workshop, participants developed Blue Print for Action Plans. Progress outcomes were measured by a 1-month, 3-month, and 6-month evaluation of each action plan and its efficacy. Evaluations described completion of action plan steps, resources used, any revision of steps, barriers encountered and how they were overcome, and exciting aspects of the action plan. Evaluation results revealed that 43 percent of participants had to revise their action plans because of barriers associated with "finding American Indian consumers" due to isolated areas of the reservation and cross-cultural communication problems. A common solution to these barriers was "persistence in outreach services." Results indicate that 44-56 percent of participants who used the pilot training workshop methods for over 6 months increased their level of independent-living service delivery to American Indian clients. Appendices include the workshop agenda, evaluation forms for the workshop and action plans, handouts, a timeline, and the project advisory committee. (Contains 18 data tables and figures.) (SV)

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Strategies on Successful Independent Living Services for American Indians with Disabilities: A Research-Dissemination Final Report

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1999

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The American Indian Rehabilitation Research and Training Center staff hopes that the Circle, which began with this Pilot Training Workshop, will grow to encompass many more Centers for Independent Living and programs that provide services to American Indian consumers. We are all related!

Abstract

This research-dissemination report is designed to disseminate the results of the AIRRTC research project, *Independent Living Outcomes for American Indians with Disabilities*. The purpose of the research project was to promote independent living outreach services that are culturally relevant for American Indians and Alaska Natives with severe or significant disabilities. The Pilot Training Workshop was conducted in Aztec, New Mexico where Blue Print for Action Plans were developed by workshop participants. The training model that was developed consisted of progress outcomes measured by a one-month evaluation, three-month evaluation, and six-month evaluation of the Blue Print for Action and its efficacy. Results of the evaluation revealed that 43% of the participants had to revise their action plans because of barriers associated with "finding American Indian consumers" due to isolated areas of the reservation and cross-cultural communication problems. A common solution to these barriers included "persistence in outreach services." The research from this project revealed that 44% to 56% of the participants who used the Pilot Training Workshop's methods for six over months had increased their level of independent living service delivery to American Indian clients.

Strategies on Successful Independent Living Services for American Indians with Disabilities

According to the Rehabilitation Act of 1973, as amended in 1992, comprehensive services for independent living (IL) must enable individuals to live and function independently. Services may include counseling, housing incidental to service delivery, transportation, attendant care, health maintenance, and recreational services, among others (Saravanabhavan, 1991). Although IL services are critical for increasing individual independence from functional limitations, IL services must also address specific cultural issues affecting the American Indian consumer. For instance, the concept of disability may not exist in some tribal cultures, while other tribal cultures may have varying definitions for the term, "disability." Due to these different tribal perspectives, IL service providers need to recognize the array of cultural and practical connections relating to disability among American Indian tribes when striving for successful IL outcomes for tribal members with disabilities (Clay, 1992). Furthermore, Sanderson, Schacht, and Clay (1996a) report that since American Indian consumers are most likely to be referred for IL services by Indian Health Services, American Indian vocational rehabilitation (VR) programs, and Community Health Representatives, these organizations need to collaborate more closely on service planning and provision with IL programs.

Due to the great need for data regarding IL service provision to American Indian consumers, the research project entitled, *VR Independent Living Counselor Effects on Independent Living Outcomes for American Indians with Disabilities* was initiated to collect information on the various state-of-the-art aspects of IL for American Indians. This

information was collected through resource manuals (Sanderson, Schacht & Clay, 1996b), surveys of IL counselors (Schacht, Clay & Maul, 1998), case file summaries (Sanderson, Schacht & Clay, 1996a), and interviews from American Indians with disabilities (Sanderson, Schacht & Clay, 1996c). The information collected was then incorporated into a training project for state and American Indian VR projects to promote a model IL outreach program. Requests for technical assistance and training from various IL service providers was then addressed. A research dissemination project entitled, *Training and Dissemination of Independent Living Outcomes for American Indian and Alaska Native Consumers* was developed to disseminate research results, and to provide recommendations for outreach and a training design. As an outcome, one dissemination activity produced two training modules: a model training workshop in the structure of an Internet mini-course and manual (Sanderson & Clay, 1997a) and a pilot training workshop and manual (Sanderson & Clay, 1997b). The purpose of this project is to develop a culturally appropriate training and technical assistance curriculum with IL outreach programs for American Indians with severe or significant disabilities.

The Internet Mini-course

An Internet model training seminar was completed through the collaborative efforts of the American Indian Rehabilitation Research and Training Center (AIRRTC) and the Rehab-Leadership Through Distance Learning Project at the University of Northern Colorado. The mini-course entitled, *Strategies on Successful Independent Living Services for American Indians with Disabilities* was offered through the Internet during

January 9–24, 1997. Thirty-four people from diverse backgrounds, who provided services in IL, vocational rehabilitation (VR), and Client Assistance Programs participated. The materials for the mini-course served to construct a pilot training workshop and manual (Sanderson & Clay, 1997b) that could be used by IL service providers when developing and implementing an action plan for American Indian consumers.

The Pilot Training Workshop

The structure and site of the workshop needed to be conducive to measure the cultural awareness of IL service providers who were interested in developing more effective outreach strategies for American Indians with disabilities. Ms. Priscilla Lansing Sanderson, Director, AIRRTC and Dr. Robert Schacht, Research Director, AIRRTC, solicited recommendations for a training workshop design and a training workshop host-site from project advisory committee members. As a result, Mr. Andy Winnegar, Deputy Director of the New Mexico Division of VR, recommended contacting Ms. Laurey Jaros, Executive Director of the Southwest Center for Independence in Durango, Colorado, located near the Southern Ute Reservation. Ms. Jaros was also Executive Director of the San Juan Center for Independence located in Aztec, New Mexico, in the Four Corners area near the Navajo reservation.

Ms. Jaros was approached to discuss the possibility of using the Southwest and/or San Juan Centers' as host sites for the pilot training workshop to be entitled, *Strategies on Successful Independent Living Services for American Indians with Disabilities.* Staff and board members of both Centers' expressed their interest in participating in the

pilot training workshop. This workshop was then planned to be held at the San Juan Center for Independence partly due to its recent establishment in the community in 1997, its location near the Navajo reservation, and the large disability population it serves. The San Juan Center provides services to people with various disabilities who live in San Juan County, New Mexico. Approximately 16,873 people with disabilities live in San Juan County. The five major services that the San Juan Center staff provide are peer support, IL skills training, self-advocacy and awareness, information and referral, and service coordination for traumatic brain injuries.

WORKSHOP METHODOLOGY

This research-dissemination project proposed to develop a pilot training workshop on strategies for IL services for American Indians and Alaska Natives with disabilities and to evaluate the Action Plans on strategies developed by workshop participants in the Four Corners area of New Mexico and Colorado. The Four Corners community was selected due to the large urban and reservation Native population.

A pilot training workshop was designed with pre-training instruments to assess the level of knowledge on outreach services to American Indians with disabilities, developing an Action Plan on strategies to provide outreach services for American Indians with disabilities, and post-training evaluation. The post-training evaluation consisted of a one-month, three-month, and six-month evaluation to assess the participants implementation of the Action Plan, utilization of resources, and issues or barriers encountered. A workshop training manual was developed and used during the pilot training workshop (Sanderson and Clay, 1997a), that had a summary of the

Four Corner's urban and reservation demographics and instruments. The co-investigator conducted the follow-up evaluations by telephone, faxes, mail, and telephone conference meetings. The training manual that was used for the pilot training workshop is available through the AIRRTC (Institute for Human Development, Northern Arizona University, PO Box 5630, Flagstaff, Arizona 86011-5630).

The training workshop was held on Thursday, March 13 through Friday, March 14, 1997. The objectives for the workshop were as follows:

1. The policy makers and direct service providers will be able to identify differences among American Indian cultures and apply this knowledge in their work.
2. The policy makers and direct service providers will be able to create outreach independent living services for American Indians with severe or significant disabilities on and off Indian lands.
3. The policy makers and direct service providers will be able to identify strategies related to the independent living needs of American Indians with severe or significant disabilities.

Participants

Approximately 28 people attended the workshop. The workshop participants represented a diverse group of ethnicities, disciplines, and ages, who were mostly administrators, direct providers of IL services, or IL consumers. Some of the workshop participants included the staff and volunteers of the San Juan and Southwest Centers for Independence.

Procedures

This report describes the research-dissemination project, entitled, *Training and Dissemination of Independent Living Outcomes for American Indians and Alaska Native Consumers*. This research-dissemination is the result of the AIRRTC three-year research project, *VR Independent Living Counselor Effects on Independent Living Outcomes for American Indians with Disabilities*. The research-dissemination project was designed as a one-year project to develop training and technical assistance for Centers for Independent Living and state and tribal VR programs to promote a model IL outreach program. Several dissemination strategies were utilized to disseminate the results of *VR Independent Living Counselor Effects on Independent Living Outcomes for American Indians with Disabilities*.

One of the strategies used was the development and implementation of a 12-day Internet Seminar in collaboration with the college of Business Administration at the University of Northern Colorado. A training manual (Sanderson & Clay, 1997b) was developed for the participants to refer to readings, exercises, case-studies, and responding to questions about the materials over the Internet. As a result of the Internet Seminar, a discussion listserve on IL was set up by Northern Arizona University (e-mail address/TO: **REHAB-IL-request@list.nau.edu**; SUBJECT: **SUBSCRIBE-IL**) and is monitored by the Institute of Human Development's AIRRTC researchers.

At the end of the Internet Seminar, a pilot training workshop was designed with pre-training and post-training instruments to assess the level of knowledge gained

during the pilot training workshop in Aztec, New Mexico, and then determine whether Action Plans developed by workshop participants on strategies to provide outreach services for American Indians with disabilities have been implemented. The post-training evaluation consisted of a one-month evaluation, three-month evaluation, and six-month evaluation. The follow-up evaluation instruments were used to measure the participants' (1) knowledge in the ability to identify differences among American Indian cultures and the application of that knowledge in their work, (2) the ability to create outreach IL services for American Indians with disabilities, and (3) knowledge in identifying strategies related to the IL needs of American Indians with disabilities.

A detailed account of the processes involved in the planning, implementation of the pilot training workshop, and evaluation is reported in the following pages.

Planning and Preparation

Co-facilitators for the workshop were Priscilla Lansing Sanderson, Director, AIRRTC and Julie Anna Clay, Research Specialist, AIRRTC. An American Indian panel emphasizing the cultural aspects of IL delivery was chosen as the training format, since it was believed that it would be more effective than a classroom approach and would enhance greater knowledge about culturally diverse ideology about American Indian tribes. Some methods to enhance cultural understanding would be the sharing of stories by American Indian service providers, tribal members with disabilities, and the teachings of a Navajo medicine man. The final agenda reflected this approach (see Appendix A).

The staff, volunteers, and board members from the San Juan and Southwest Center's were invited to participate in the workshop to identify and develop strategies on successful IL services for American Indians with disabilities. In addition, they were encouraged to invite service providers in their area who expressed interest in reaching unserved or underserved American Indians in rural areas. Representatives from the Navajo Nation Office of Special Education and Rehabilitation Services (NNOSERS) and the Ute Mountain Ute VR Project were invited to participate as speakers and partners in the training effort. Tribal people with disabilities were also asked to participate as trainers and consultants in the area of IL.

Letters of invitation, the draft agenda, and registration forms were sent to 31 potential participants, located near the Four Corners area. The potential participants represented a variety of organizations, including Tohatchi Special Education and Training Center, the Indian Children's Program, Fort Lewis College Services for Students with Disabilities, Coyote Canyon Rehabilitation Center, New Mexico Division of Vocational Rehabilitation, Navajo Nation Office of Special Education and Rehabilitative Services and its IL services program, and the San Juan and Southwest Centers. Many of the participants were associated with the San Juan and Southwest Centers for Independence.

In addition, a packet of handouts was compiled for the participants of the workshop and distributed in a workshop folder, along with other materials (Appendix B). A pre-session questionnaire was completed by participants before the start of the

workshop to assess their knowledge about IL outreach services for American Indians with disabilities.

Workshop Activities

On Thursday, March 13, 1997, the workshop began at the San Juan Center for Independence in Aztec, New Mexico. Harry D. Yazzie opened the workshop with a prayer conducted in Navajo. Next, Priscilla Lansing Sanderson described AIRRTC's history and mission, the purpose of the pilot training workshop, and the importance of understanding American Indian culture on the part of service providers. The host site representative, Sherry Watson, Program Coordinator of the San Juan Center for Independence, described the purpose of the Center. Closing the introductory portion of the workshop was Laurey Jaros, Executive Director of the San Juan and the Southwest Centers for Independence. Ms. Jaros explained the relationship between the two Centers. She expressed her hopes for the workshop and extended thanks to Ms. Sanderson and other AIRRTC staff members for offering the opportunity to learn about American Indian culture and IL strategies for outreach.

Activities included panel presentations by American Indian consumers and service providers. Hoskie Benally, a Navajo medicine man, and cultural consultant for the two-day workshop, gave a presentation and offered an invitation for an intertribal sweat ceremony. Discussion groups and other panel presentations took place. Before the close of the workshop, time was set aside for participants to form groups in which the participants were asked to develop a draft action plan for successful IL outcomes. People were urged by the workshop facilitators to further develop their action plans

throughout the training evaluation process, which would span over a period of nine months. Finally, to close the workshop, Ms. Sanderson facilitated a Talking Circle, where participants shared what they have learned over the two days.

American Indian Consumer Panel. The *American Indian Consumer Panel*, included Speaker #1, a research specialist and Speaker #2, a student. Speaker #1 provided an example of consumer interests in IL strategies by outlining her experiences with a disability both as a woman and as an Omaha tribal member. Speaker #2 described some barriers he had encountered as a consumer with a disability, attempting to attain adaptive technologies.

During the panel discussion, a question was posed for Speaker #2 concerning his experiences with accessibility and technology at his college. He described some difficulties he had encountered, particularly with the lack of technology offered on campus. He expressed a desire to learn and advocate for improved accessibility in his college environment, due to his disabilities which are worsening in nature, such as his vision and arthritis. The panel discussion closed with a fifteen minute question and answer session.

Panel on American Indian Cultural Considerations. Following a short break, the *Panel on American Indian Cultural Considerations* was opened with introductions by the moderator, Priscilla Lansing Sanderson. The panel included Speaker #1, American Indian VR Project with New Mexico Division of VR; Speaker #2, Navajo Nation Office of Special Education and Rehabilitative Services (NNOSERS); Speaker #3, Ute Mountain Ute VR; and Speaker #4, Ute Mountain Ute VR. Speaker #1 defined her position with

the American Indian VR Project, which serves a total of 21 tribes and two counties in her state, and encounters as many as seven Native languages spoken by consumers. Speaker #2 outlined some of the services NNOSERS offers for IL and VR programs. She also emphasized the importance of knowing tribal languages as a key to providing successful services to American Indians.

Speaker #3 spoke of his involvement with Tribal Enterprise VR and expressed that so far he found that listening and human relations skills acquired previously as a counselor helped him immensely in working with the Ute Mountain Ute consumers he encounters. He also described his adjustment to increasing the amount of time spent with Ute Mountain Ute consumers, in order to develop a relationship of mutual trust. Speaker #4, who described his background in facilities management of a tribal park and his transfer of firsthand knowledge about Ute Mountain Ute culture and history to IL service provision, felt that teamwork is the key to service provision and cultural awareness. When panel members were finished, the audience and panel members ensued a discussion concerning issues such as IL services and advocacy, difficulties of attaining reasonable accommodation for consumers, and funding.

Corn Pollen Journey for Service Providers. After the lunch break, Priscilla Lansing Sanderson opened the afternoon session, *Corn Pollen Journey for Service Providers*, by introducing the presenter, Hoskie Benally. Mr. Benally began the "Corn Pollen Journey" by explaining the use of sweet grass as an herb which Native American people use for opening the mind and inviting the spirits. He then described the five resources which are open to Native Americans with disabilities who seek continued

wellness or healing—traditional medicine, contemporary Western society's medicine and methods, VR, the Native American Church, and Christianity. He then stressed the need to understand the concept of creation themes, which develop the culture, rituals, and ceremonies of tribes, among Native Americans, and the connection of harmony and wellness which stem from that concept, in an attempt to bring together traditional and modern practices.

Next, he introduced *The Glittering World*, a video which provided a description of the Navajo version of creation as the emergence of "First Man" and "First Woman" from four or five different worlds to the present world, called the "Glittering World." The video went on to outline the historical origin of the Navajo from the Athapaskan-speaking people and their migrations to the Southwest, the influence of the Spanish and of trappers from the east, the Long Walk, and the treaty which created today's Navajo reservation. After the video ended, Mr. Benally suggested alternate renderings of creation held by various tribes or among the Navajo people. He also provided condensed versions of some legends surrounding the "Changing Woman" who brought forth Navajo culture, and about her sons, "The Twins," which gave rise to Navajo conceptions of harmony versus disharmony, healing ceremonies, the sacred mountains, and the Navajo relationship to nature.

Next followed clarification of Navajo self-identity and self-sacredness, involving their spirit's choice of its journey on earth which gives the Navajo purpose in life and an eternal nature. It also includes a duality of male and female natures, and a deep sense of clanship which relates to their system of harmony and wellness. The thinking,

planning, livelihood, and resilience clans, he explained, relate to the four clans of a given Navajo individual. Also, next to the four directions (East, West, North, and South), are the directions of the earth and sky. Lastly, the Navajo honor themselves as the seventh direction, the center of the universe, and as holy people.

Mr. Benally expanded on the importance of harmony to Navajo people, that it is to be sought for, established in their lives, and advocated for. This involves self-examination and sharing with others, and is meant to provide a sense of accomplishment and achievement. Harmony could also be achieved by following any of the paths described earlier—traditional methods, contemporary methods, VR, Native American Church, or Christianity. In addition, complete rehabilitation in the Navajo approach involves all four aspects of the person - spiritual, emotional, mental, and physical. The origin of Navajo healing ceremonies was then outlined according to a well-known legend involving various plants used in such ceremonies.

The concept of balance in life was explained and attributed to the "Coyote Story," in which the coyote brought bundles to the earth which included hardship, lack of self-discipline, loneliness, and resentment. He went on to describe how these were dealt with by the application of prayers or songs, commitment, giving up self-pity, and exercising resilience, respectively. Mr. Benally then incorporated the four directions and the four life areas into — thinking, planning, relationships (implementation), and physical (facilities or resources). Next, he provided questions for service providers to address: a) What is the philosophy or mission of IL?; b) What will it take (training, etc.) to get there?; c) How can we work together as a team? What are our responsibilities?;

and d) What resources are needed to make it work? What is the nature of the facility being used for?

Mr. Benally introduced a second video titled, *American Indian Concepts of Health and Unwellness*. The video covered ten basic American Indian concepts, as follows: 1) existence of the Supreme Creator; 2) humans are three-fold beings (body, mind, and spirit); 3) inanimate objects have spirits; 4) the spirit exists after the body; 5) illness affects mind, body, and spirit; 6) wellness is harmony in body, mind, and spirit; 7) unwellness is disharmony in body, mind, and spirit; 8) natural unwellness is the violation of a tribal taboo; 9) unnatural unwellness is caused by witchcraft; and 10) wellness is the responsibility of the individual.

Following the video, Mr. Benally briefly described the role of medicine men and ceremonies. These roles included, the specialization of medicine men in certain areas, and the four areas the Navajo identify as the sources of mental or physical unwellness: taboos violated during the time of conception, self-infliction of illness during life, natural phenomenon, and witchcraft.

Finally, Mr. Benally gave a brief history of the gradual introduction of the Native American Church, and the increasing participation among the Navajo and other Native American tribes for healing. He emphasized the importance of the service provider's role in recognizing and including the spiritual aspect of the consumer when meeting Native American needs. It is important for service providers to use a Native American client's traditional beliefs, he said, as a strength for reaching balance and harmony in making life adjustments and eventual acceptance of one's disability. The attitude of

integration of Western therapeutic approaches with traditional healing practices is to be recognized as a viable means of working with Native American clients.

After his presentation was concluded, Mr. Benally invited participants to attend an optional intertribal sweat ceremony, which would be conducted at his residence. There are many types of sweats which are a cleansing, cultural, and spiritual activity. The intertribal sweat may include not only members of the same or different tribes, but also other races. Some sweats are gender-based, while others can be family-oriented. This intertribal sweat enabled approximately six workshop participants, as well as three AIRRTC representatives, to experience a unique cultural and spiritual activity.

Discussion on Corn Pollen Journey and Cultural Consideration. The next morning, Friday, March 14, the first session to commence was the *Discussion on Corn Pollen Journey and Cultural Considerations*. Priscilla Lansing Sanderson facilitated, and the panel included Speaker #1, NNOSERS; Speaker #2, IL Resource Center; Speaker #3, NNOSERS; and Speaker #4, IL consumer. Ms. Sanderson invited comments on the co-sweat conducted the previous night by those who had attended. Speaker #1 suggested a "mind over matter" approach to sweats, in which sweats become a teaching method for building endurance and stamina. She also explained that the VR program she works with includes an annual Native American Church ceremony, which encourages the idea that staff members make time for themselves to balance work which involves continual giving of their time and energy to others. Speaker #2 spoke of her transition from faith of Western origin to traditional Navajo ways after marrying a traditional

Navajo man, and her present efforts to include traditional methods for Individual Written Rehabilitation Plans to help consumers overcome barriers.

Speaker #3 provided his perspective as an urban-born American Indian who made the transition to a Pueblo reservation; he shared the view held by some American Indians that certain ceremonies are sacred, requiring exclusion of non-Indians. However, he also added that some Native tribes have a kind of ethnocentrism about their own tribe, and mentioned some of his difficulties being half of one tribe, half of another. He emphasized the importance of acceptance of "outsiders" and treating everyone with respect. Speaker #4 explained that his experience had been one of discovering his heritage rather than having been taught it as a child, and felt that religion was an area best not spoken about, though he recognized the importance of passing it on. He expressed his views on Christianity and indoctrination of beliefs, and views on Native American sense of ownership and respect for others. A question and comment session, allowing participants to address panel members, closed this panel's activities.

Panel on Strategies to Provide Independent Living Services. The next scheduled event was the *Panel on Strategies to Provide Independent Living Services to American Indians with Disabilities*, moderated by Priscilla Lansing Sanderson. The panel included Speaker #1, NNOSERS; Speaker #2, AIRRTC; Speaker #3, NNOSERS; Speaker #4, NNOSERS; and Speaker #5, IL consumer. Speaker #1 stated that she used traditional methodology in provision of services to American Indians with disabilities, and appreciated the same support and treatment in the assistance she receives as an IL consumer. Speaker #2

added that in providing IL services, one deals with people from a wide variety of backgrounds, or even as Speaker #1 indicated, a combination of backgrounds. Therefore, the first strategy to use as a service provider would be the recognition of people from different cultures and even generations. Speaker #2 also stated that Centers for Independent Living (CILs) should gain a more bureaucratic aspect, one which promotes using the same methodology on widely different people that attempt to fit square pegs into round holes. She encouraged a practice of individual attention which would involve unique strategies as a solution.

Speaker #3, introduced what she perceived as barriers to IL service provision, such as the sheer volume of cases she must deal with and insufficient personnel, housing and transportation barriers for consumers, the absence of available technology in rural areas, and neglect of personal care attendant services. Speaker #4 shared some of her thoughts on the discussion of IL service funding, and the difficulties involved in providing accessible homes for a few versus providing a variety of services for many. She added that housing issues do not lie in the hands of CILs, but are primarily decisions made by tribal chapters and Housing Services. Speaker #5, as a Navajo tribal consumer, expressed his frustration with the "politics" of some programs, and felt that the solution lay in the standardization of procedures.

Discussion developed among various participants regarding the process of providing IL accommodations and services. Some strategies identified by workshop participants included the necessity of proceeding through the chain of command, the importance of patience in this process, the importance of consumers learning to work

for what they needed and advocate for themselves - which is the intended meaning of IL.

Round Table Discussions on Developing an Action Plan. Priscilla Lansing Sanderson and Julie Anna Clay co-facilitated the *Round Table Discussions on Developing an Action Plan for Communication Methods, Outreach Services, Sharing Resources, and Providing IL Services*. The purpose of the action plan was to create a blueprint for following steps that could be used for providing culturally appropriate IL outreach services for American Indian consumers. Participants were encouraged to contemplate ideal IL outcomes involving cultural awareness for effective service provision. Participants then separated into five groups of four to six people in order to put ideas into future plans for action. Afterwards, each group was given the opportunity to describe the outline of their action plan to the other participants, and how it would be implemented at their individual organizations. Finally, participants were asked for their voluntary involvement of providing feedback over the following nine-months regarding the progress of their action plans. Participants were also informed that their feedback during the evaluation process would assist with the modification of the AIRRTC training manual for IL service providers.

Measurements

Several instruments were used to measure the final results for the nine-month follow-up of the pilot training workshop. The AIRRTC team consulted with the Rehab Leadership through Distance Learning at the University of Northern Colorado and used their questionnaire formats. The instruments consisted of a Pre-session

Questionnaire and post-session questionnaires including, the Pilot Training Workshop Evaluation, the Participant Reaction Narrative Evaluation, the Participant Information Form, Action Plans, Job Performance Evaluations, and a One-, Three-, and Six-month Evaluation. The Pre-session Questionnaires were completed and collected prior to the workshop, and the post-session questionnaires were completed and collected after the workshop. Additional follow-ups were either conducted by phone, fax, or through the mail.

The **Pre-session Questionnaire** was used as a qualitative measurement of participants pre-training workshop knowledge of issues affecting American Indians with disabilities. The Pre-session Questionnaire consisted of three questions. The first question asked the respondent to describe the differences between American Indians living in rural and urban areas. The second question asked the respondent to identify three outreach strategies for consumers. Finally, the third question asked the respondent to list three common barriers to providing IL services to American Indians with disabilities (see Appendix C).

Three of the post-session questionnaires were completed and collected from most participants immediately after the workshop's closure (Pilot Training Workshop Evaluation, the Participant Reaction Narrative Evaluation, and the Participant Information Form). Additionally, the Job Performance Evaluation was disseminated two times, which assessed the experience level of the participants service provision to American Indian consumers before they attended the workshop, and after six months following the workshop. The two last measurements were completed by integrating

feedback from the participants' Action Plans and their One-, Three-, and Six-month Evaluation Questionnaires.

The **Pilot Training Workshop Evaluation** measured nine topic items using a rating system. However, after the training workshop, two of the nine questions were discovered to be nearly identical, so only the most comprehensible question was chosen for measurement, leaving a total of eight topic items used for the quantitative measurement. Two additional items, that were not part of the rating system, listed participant background and ethnic origin, and were also included in the Pilot Training Workshop Evaluation form (Appendix D).

The **Participant Reaction Narrative Evaluation** contributed as a qualitative measurement for the evaluation of the pilot training workshop, giving participants an opportunity to assess the workshop in their own words. Participants were asked six questions relating to the workshop (see Appendix E). The first question asked what the person liked most about the seminar. The second question concerned their reaction to the seminar methodology. The third question asked how the seminar could be improved. Respondents were also asked to list two seminar ideas that intrigued them. Additionally, respondents were asked another question about one idea they would implement immediately. The last question on the Participant Reaction Narrative Evaluation asked participants to describe other seminars they would like to see offered by the AIRRTC.

The **Participant Information Form** asked for characteristics such as gender and age (see Appendix F). It also assisted with providing accurate information regarding

the participants' name, title, organization, and address, which was necessary with attempting follow-up contact.

Each **Action Plan** was completed by respondents by identifying expected outcomes, predicting steps needed in order to fulfill their assigned objectives, and anticipating the resources needed to produce positive outcomes. "Action Planning" was to enable participants to take ideas, information, and materials from the pilot training workshop and implement them with IL services for American Indian consumers. In this way, the action plans would help to formulate ideas into real outcomes for IL services. The four-step process involved in "Action Planning" are to: (1) develop outcomes that describe the results needed to be accomplished; (2) write action steps that need to be followed to accomplish the outcomes; (3) identify critical people who would be involved in accomplishing each step; and (4) establish dates to begin or accomplish each action step (see Appendix G).

Each **One-, Three-, and Six-month Evaluation** had the same format of five questions (see Appendix H). The evaluation questions consisted of: (1) completion of action plan steps and describing those steps; (2) describing resources used so far; (3) revision of any steps and how done so; (4) barriers encountered while using their action plan and how those barriers where overcome; and (5) describing the most exciting aspect of their action plan so far. The One-, Three-, and Six-month Evaluations were disseminated at appropriate time intervals following the workshop.

The **Job Performance Evaluation** compared participants level of experience in providing culturally appropriate IL services and strategies for American Indian

consumers. Experience level was assessed as a quantitative measurement based on participants' work experience before they attended the workshop and six months post-workshop, after they had implemented their action plans. Level 1 indicated the number of participants with the least experience working with American Indians with disabilities, and increasing in degree up through Level 5, which indicated the number of participants with the most experience working with American Indians with disabilities. Both Job Performance Evaluations were of identical format (see Appendix I).

RESULTS

Pre-session Questionnaire

Twenty-four participants completed and returned their Pre-session Questionnaires. The findings from the Pre-session Questionnaire indicated that most respondents believed that American Indians who reside on reservation lands were closer to traditional living, were less disassociated from their own culture, and were more commonly able to participate within family roles than urban dwelling American Indians. It was also noted that urban American Indians have more diversified opportunities for service access, however, most find themselves living in two different worlds—one of American Indian and the other of dominant culture. Many shared that strategies for understanding the client's cultural and traditional background, and utilizing traditional support systems, produces better IL service outcomes. Lastly, many participants identified barriers to providing IL services for American Indian consumers, such as lack of knowledge and differences in Native cultures, culturally inappropriate service plans, cross-cultural language barriers, lack of consumer

awareness of available services on tribal lands, shortage of service providers on tribal lands, and lack of reliable transportation on tribal lands.

Pilot Training Workshop Evaluation

Twenty-three participants returned the Pilot Training Workshop Evaluation (See Appendix D). Each workshop evaluation item was responded to by no less than 20 participants at any one time. The rating system ranged from using one (1) as "poor" through five (5) as "excellent." Item one asked participants to "Please rate each section's format." See Table 1 for participant ratings for each training session. No items in this section were rated as "poor."

Table 1
Pilot Training Workshop Evaluation

Training Sessions	Fair		Average		Good		Excellent	
	%	#	%	#	%	#	%	#
American Indian Consumer Panel	0	0	13	3	74	17	13	3
Panel on Cultural Considerations	4	1	22	5	61	14	13	3
Corn Pollen Journey for Service Providers	0	0	0	0	30	7	70	16
Discussion on Corn Pollen Journey and Cultural Considerations	0	0	14	3	59	13	27	6
Panel on Strategies to Provide IL Services	5	1	28	6	62	13	5	1
Round Table Discussions on Developing Action Plans	9	2	23	5	59	13	9	2

Participants were asked to evaluate the "Relevance of presentations/panels to workshop objective" for the second item of the Pilot Training Workshop Evaluation (See Table 2). The presentation/panel rated most relevant by workshop participants was *Corn Pollen Journey for Service Providers*. No presentations or panels were rated as "poor."

Table 2
Evaluation Results on Relevance of Training

Relevance of Training to Workshop Objective	Fair		Average		Good		Excellent	
	%	#	%	#	%	#	%	#
American Indian Consumer Panel	5	1	23	5	55	12	18	4
Panel on Cultural Considerations	9	2	9	2	59	13	23	5
Corn Pollen Journey for Service Providers	0	0	5	1	45	10	50	11
Discussion on Corn Pollen Journey and Cultural Considerations	5	1	10	2	60	12	25	5
Panel on Strategies to Provide IL Services	0	0	30	6	65	13	5	1
Round Table Discussions on Developing Action Plans	0	0	30	6	65	13	5	1

The third item of evaluation asked the participants to evaluate the "Quality of workshop activities." See Table 3 for participant ratings on quality of training activities. No participants rated the quality of training as "fair" or "poor."

Table 3
Evaluation Results on Quality of Training Activities

Quality of Training Activities	Average		Good		Excellent	
	%	#	%	#	%	#
Interesting	9	2	45	10	45	10
Added to Understanding	9	2	57	13	27	7
Well-Designed	13	3	63	14	22	5
Related to Overall Content	13	3	59	14	22	5

The fourth evaluation item was the "Presenters' knowledge of topics." See Table 4 for participant ratings of presenters' knowledge of topics. None of the respondents rated the presenters' knowledge as "poor."

Table 4
Evaluation Results on Presenters' Knowledge of Topics

Presenters' Knowledge of Topics	Fair		Average		Good		Excellent	
	%	#	%	#	%	#	%	#
Background Material	0	0	13	3	43	10	43	10
Broad Coverage of Content	0	0	13	3	65	15	22	5
Able to Answer Questions	0	0	13	3	57	13	30	7
Thorough Treatment of Subject Matter	4	1	13	3	61	14	22	5

The fifth evaluation item rated the "Organization of the workshop." See Table 5 for participant ratings of the organization of training. No participants rated the organization of the workshop as "poor."

Table 5
Evaluation Results on Organization of Training

Organization of Training	Fair		Average		Good		Excellent	
	%	#	%	#	%	#	%	#
Completeness	0	0	15	3	65	13	20	4
Clarity and Orderliness of Structure	0	0	45	10	23	5	32	7
Variety of Presentation Methods	0	0	48	10	29	6	24	5
Pacing of Presentations	9	2	29	6	33	7	29	6
Timing of Breaks	9	2	23	5	50	11	18	4

The sixth evaluation topic listed the "Value of printed materials." See Table 6 for participant ratings on the printed materials disseminated at the workshop. No respondents rated the categories as "fair" or "poor."

Table 6
Evaluation Results on Printed Materials

Value of Printed Materials	Average		Good		Excellent	
	%	#	%	#	%	#
Relevance	4	1	22	5	74	17
Clarity	9	2	17	4	74	17
Practical Applications	9	2	43	10	48	11
Usefulness Now	9	2	22	5	70	16
Usefulness in Future	4	1	22	5	74	17
Well-Designed	4	1	26	6	70	16
Interesting	4	1	22	5	74	17

The seventh evaluation item rated the "Overall value of workshop training to you." See Table 7 for participants ratings on the value of training. No respondents rated the overall value of the workshop training as "fair" or "poor."

Table 7
Evaluation Results on Value of Training

Overall Value of Training	Average		Good		Excellent	
	%	#	%	#	%	#
Met Expectations	13	3	48	11	39	9
Useful Now	13	3	35	8	52	12
Quality	0	0	52	12	48	11
Satisfaction	4	1	48	11	48	11
Useful in Future	0	0	39	9	61	14

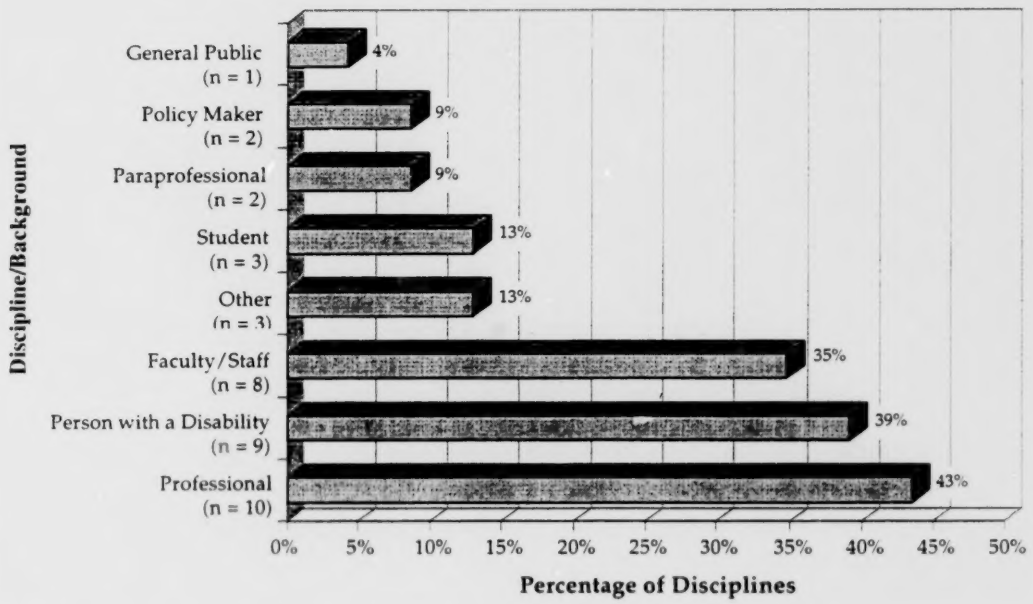
The eighth evaluation topic asked participants to "Please rate the workshop location." See Table 8 for participants' ratings of the workshop location.

Participant background and ethnic origin was also measured by the Pilot Training Workshop Evaluation Form (See Figure 1 of participant discipline).

Table 8
Evaluation Results of Workshop Location

Workshop Location	Poor		Fair		Average		Good		Excellent	
	%	#	%	#	%	#	%	#	%	#
Location	4	1	4	1	26	6	39	9	26	6
Facility	0	0	0	0	22	5	57	13	22	5
Comfort	0	0	0	0	36	8	45	10	18	4

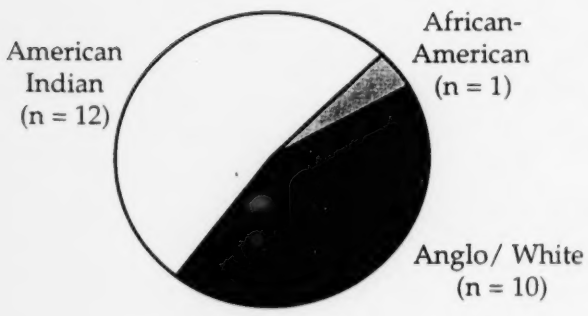
Figure 1
Evaluation Results of Discipline



Note: More than one response may apply under each subject.

Figure 2 details the findings of the respondents' ethnic origin. The Participant Information Form indicated from 20 responses, there were 12 females and 8 males, and the majority of respondents were under age 65 (n = 19) (see Appendix F).

Figure 2
Evaluation Results of Ethnic Origin



Participant Reaction Narrative Evaluation

Participants shared some common responses on their Participant Reaction Narrative Evaluation. The majority of respondents enjoyed the networking of opportunities and the sharing of information and ideas. Some respondents commented that the consumer panel was effective in educating providers about daily needs for consumers. Many participants absorbed new information related to cultural issues such as clan differences and tribal collaborations. In order to provide more effective IL outcomes and to eliminate cross-cultural barriers, participants shared a perspective in regards to training personnel who are American Indian to work as IL service providers. Immediate changes centered on service providers desiring to improve their interactions

with American Indians with disabilities. Finally, many responses involved requests for seminars dealing with funding for IL and VR services.

Action Plans

Sixteen participants returned their Action Plans. The Action Plan forms (see Appendix G) were completed, enabling participants to take ideas, information, and materials from the training and implement them in their provision of services to American Indians with disabilities. The Action Plan consisted of a four-step process to (1) develop outcomes that describe the results needed to be accomplished, (2) write Action Plans that need to be followed to accomplish the outcomes, (3) identify critical people who will be involved in accomplishing each step, and (4) establish dates to begin or accomplish each action step. More than one response to each Action Plan item was given by some participants (see Figures 3, 4, and 5).

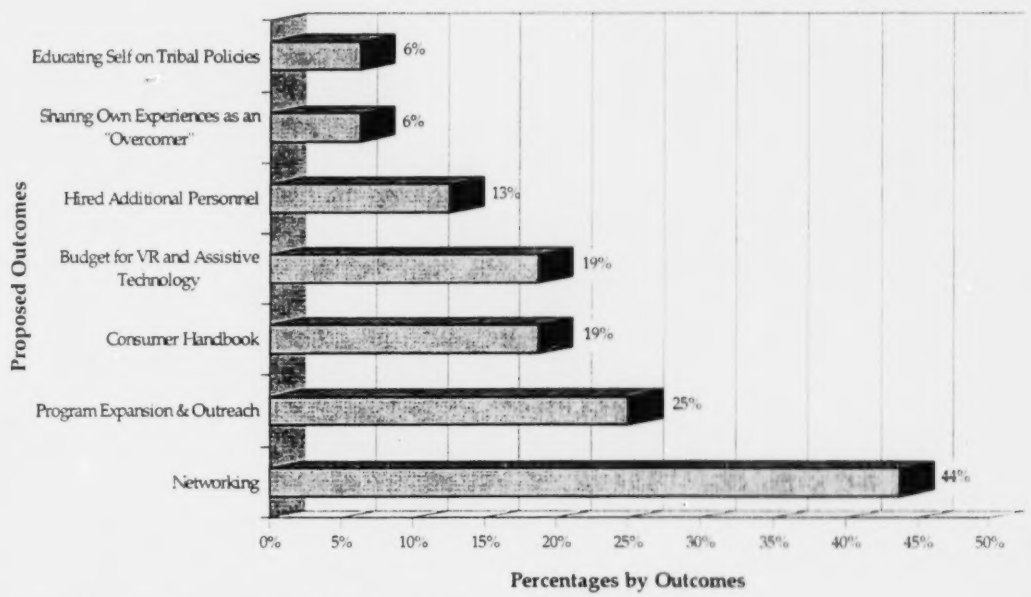
The respondents' first step was to develop outcomes describing the results they wanted to accomplish. The respondents identified "networking" as a priority [44% (n = 7)], followed by "program expansion and outreach" [25% (n = 4)]. Next, respondents suggested to develop a consumer handbook [19% (n=3)], allow a budget for VR technology and assistive technology [19% (n=3)], hire additional personnel [12% (n=2)], sharing own experiences as an 'overcomer' [6% (n=1)], and educating oneself on tribal policies [6% (n=1)] (see Figure 3).

The second step in the Action Plan was to write action steps which were necessary to follow in order to accomplish the desired outcomes. Steps to implement services concentrated mostly on involving "data input and gathering information" [81%

(n=13)], starting "outreach activities" [50% (n=8)], and "working with tribal organizations" [38% (n=6)]. Additionally, respondents mentioned to "conduct consumer satisfaction evaluations" [25% (n=4)], begin "community networking" [25% (n=4)], and "contact individuals from the workshop" [25% (n=4)], (see Figure 4).

The participants identified resources to accomplish the first and second steps of their Action Plans. The largest resources that was needed for goal attainment were to

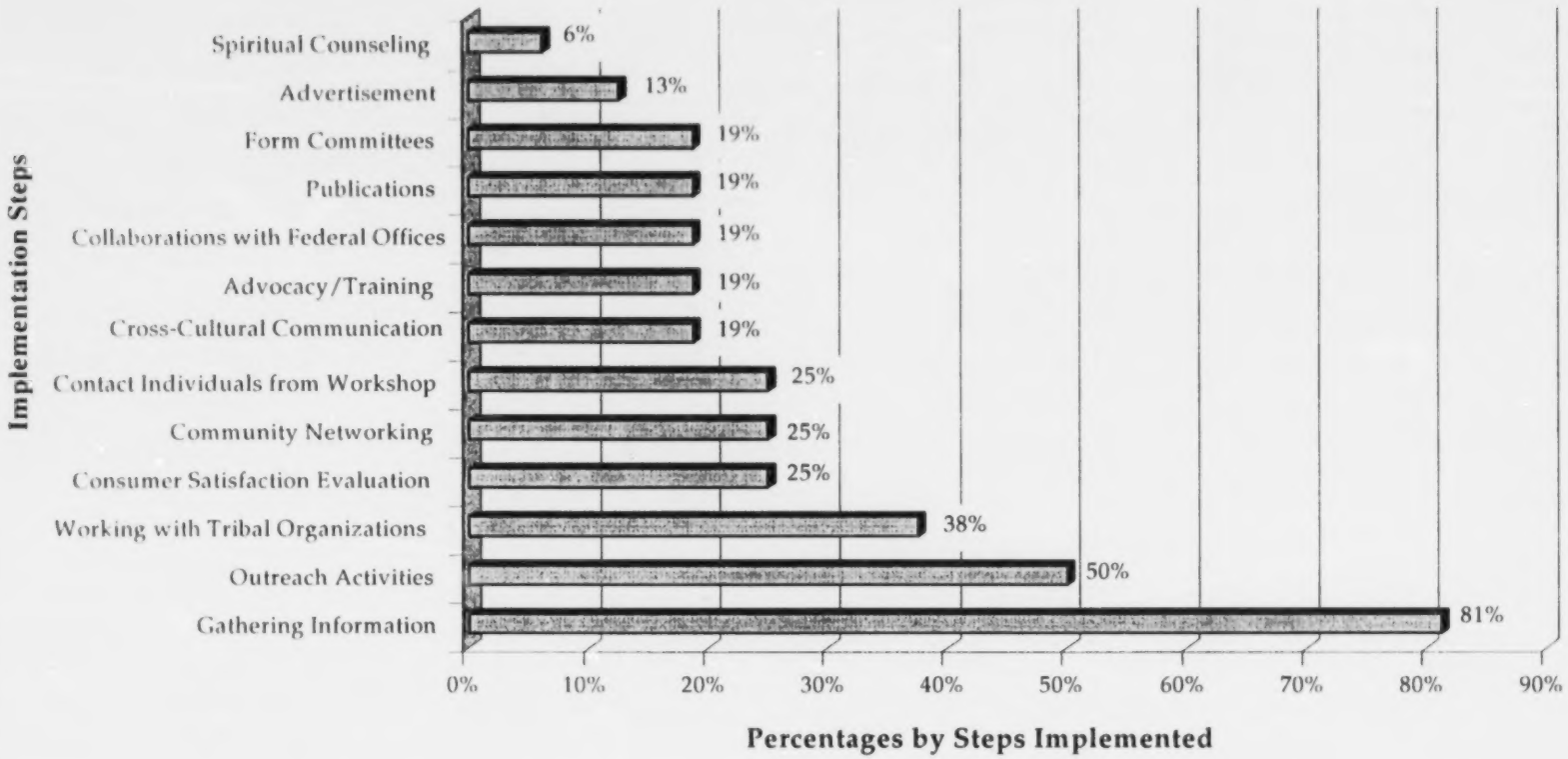
Figure 3
Results of Blueprint for Action Plan: Proposed Outcomes



Note: More than one response may apply under each subject.

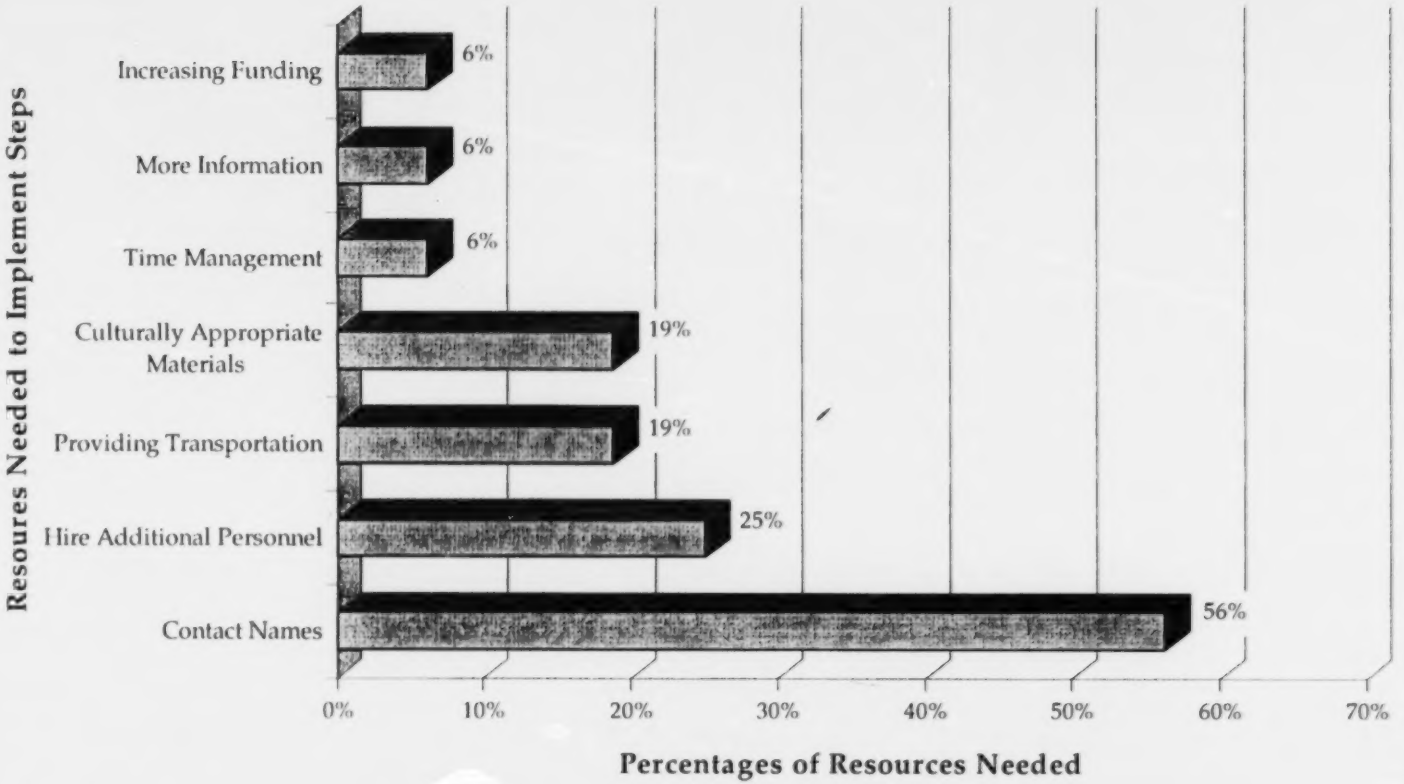
"obtain contact names" [56% (n=9)], followed by "hiring additional personnel" [25% (n=4)], providing transportation [19% (n=3)], and producing and disseminating culturally appropriate materials (media, brochures, etc.) [19% (n=3)].

Figure 4
Results of Blueprint for Action Plan: Implementing Steps



Note: More than one response may apply under each subject.

Figure 5
Results of Blueprint for Action Plan: Resources Needed



Note: More than one response may apply under each subject.

One-, Three-, and Six-month Evaluations

Questions for the One-, Three-, and Six-month Evaluations critiqued participants' progress with their action plans. More than one response by some participants was given for certain questions.

Twelve participants completed the **One-month Evaluation** (see Table 9). All of the respondents (100%) still had additional "planning" to do, and the majority (n = 11), had succeeded in their steps of "making and establishing contacts." Identified resources (n = 6) were listed as, "finding brochures, flyers, lists, and referrals" that were necessary for carrying out plans. Revisions to certain action plans included changing of method to their initial plans (n = 3). Of the barriers encountered, four participants indicated "transportation, time, and places for networking," and three participants sought a solution by "establishing new or different contacts." Three participants indicated that the most exciting aspect of their work was, "new information they were collecting," "networking," the "positive outcome of their plan," and the "involvement, contribution, and the feeling of accountability" of using their plans.

The **Three-month Evaluation** was answered by ten participants (see Table 10). Six participants were still "planning additional steps," and six participants shared that "appropriate contacts" had been made. Five participants felt they "needed more contact or informational resources." Four participants made their revisions by changing the method of their action plan. "Obtaining or keeping contacts" was also considered the greatest barrier (n = 4), and solutions concentrated on "new methods of contacting" (n = 2) and "hiring new personnel" to help (n = 2). Finally, four participants revealed that the most exciting aspect was "networking."

Table 9
One-month Evaluation Results
(N = 12)

Evaluation Topic	%	#
Progress with completing action plan steps		
Still planning/more planning needed	100	12
Contacts made	92	11
Resource guide/disseminated information	25	3
Meetings	17	2
Gathering data	17	2
Formed committees/working in groups	17	2
Advertisement	17	2
New personnel hiring	8	1
Resources needed		
Brochures/flyers/lists/referrals	50	6
Training workshops	17	2
Communication	17	2
Resourceful relative (family support)	8	1
Housing agency (low rental)	8	1
Contacts with other service providers	8	1
Revisions to action plan		
Changing of method	25	3
New contacts	17	2
More collaboration	17	2
Different timeline	8	1
Hire new personnel	8	1
Barriers encountered		
Transportation, time, places for networking	33	4
Outreach	17	2
Contacting other providers	17	2
American Indian consumers found no need for additional services	8	1
Solutions		
New or different contacts	25	3
Incorporate action plan into job at ILC	8	1
Training others in self-advocacy	8	1
Use consumer family members as resources	8	1
Exciting aspect of work		
Positive outcomes	25	3
New information	25	3
Networking	25	3
Involvement/Contribution/Accountability	25	3

Note: More than one response may apply under each subject

Table 10
Three-Month Evaluation Results
(N = 10)

Evaluation Topic	%	#
Progress with completing action plan steps		
Planning still in progress	60	6
Contacts have been made	60	6
No progress	30	3
Lists compiled, referrals obtained, gathering information	30	3
Resources needed		
Contacts and information	50	5
More service providers, assistive technology	20	2
Self-motivation	10	1
Networking	10	1
Revisions to action plan		
Change of method	40	4
Hire new personnel	10	1
Barriers encountered		
Obtaining or keeping contacts	40	4
Time management	20	2
Not enough personnel	20	2
Lack of transportation	10	1
Lack of training	10	1
No local referrals	10	1
No funds	10	1
No advertisement	10	1
Solutions		
New method of contacting	20	2
Trying to hire more personnel	20	2
Volunteering transportation	10	1
Managing time better	10	1
Investigating other referrals	10	1
Investigate sources to back funding	10	1
Exciting aspect of work		
Networking	40	4
Involvement/Contribution/Accountability	30	3
Positive outcome	20	2

Note: More than one response may apply under each subject

Table 11
Six Month Evaluation Results
(N = 7)

Evaluation Topic	%	No.
Progress with completing action plan steps		
Planning in progress	43	3
Receiving information	29	2
Outreach programs	29	2
Disseminating information	29	2
Additional contacts	29	2
Hiring personnel	14	1
Formulating contracts	14	1
Resources needed		
More contacts	43	3
Networking	29	2
More space	14	1
Utilizing own resources as a resource	14	1
Help from other workshop participants	14	1
Advertisement	14	1
Revisions to action plan		
New goals and objectives	43	3
Training workshop	14	1
Hire personnel	14	1
Barriers encountered		
Finding consumers	57	4
Lack of transportation and lack of resources available	43	3
Finding contacts	43	3
Lack of time	29	2
Finding qualified personnel	14	1
Difficulty in educating providers	14	1
Solutions		
Persistence	57	4
Hiring student intern	14	1
Asking questions	14	1
Exciting aspect of work		
Involvement/Contribution/Accountability	57	4
Networking	29	2
Positive outcome	14	1

Note: More than one response may apply under each subject

Seven participants responded to the **Six-month Evaluation** (see Table 11).

Three participants were still "planning for more progress," while two participants were "receiving information" for program development.

Three participants believed that "additional contacts" were still necessary resources, and were revising their action plan steps with "new goals and objectives." Barriers were associated with "finding consumers" due to isolated areas of the reservation and cross-cultural communication problems (n = 4). A common solution to these barriers included "persistence" (n = 4) in outreach services. After six months, most respondents indicated that "involvement, contribution, and/or accountability" for their efforts was the most exciting aspect of their action plans.

Job Performance Evaluation

Twenty-one participants completed and returned the first job performance evaluation (pre-workshop experience), and 12 participants completed and returned the second job performance evaluation (post-workshop experience). However, in order to justify any progress shown with providing services to American Indian consumers, only nine responses who completed the pre- and post-workshop job performance evaluation were utilized for analysis (see Table 12 and Table 13).

The results show that there was an overall increase in the respondents' experience level with how IL strategies were identified, specified, and implemented for American Indian consumers. Two respondents indicated progressing from Level 1 to Level 2. Three respondents chose Level 2 in both Job Performance Evaluations, and one respondent chose Level 5 in both Job Performance Evaluations. Three respondents chose Level 2 in both Job Performance Evaluations, and one respondent chose Level 5 in

both Job Performance Evaluations. However, one respondent decreased from Level 5 down to Level 3. It appears that four participants showed an overall improvement with their Job Performance Level rating the six-month evaluation period following the workshop.

Table 12
Job Performance Evaluation Results: Pre-workshop Experience

Level	Definition of Level	n of responses	
		%	#
1	Participant is not involved in providing IL strategies and services for American Indians nor have they identified any.	22	2
2	Participant has identified some general IL strategies and services for American Indians with disabilities.	33	3
3	Participant has identified specific IL strategies for various American Indian cultures within their state.	22	2
4	Participant has identified and implemented specific IL strategies for various American Indian cultures within their state.	0	0
5	Participant has identified and implemented specific IL strategies for various American Indian cultures within their state and there is evidence of an improved quality of life for those served.	22	2

Note: N of responses = 9

It is unknown if the one respondent who was consistent in his/her Level 5 status through both evaluations had actually improved his/her job performance since there was no other level higher than Level 5 to choose from. Hence no more than five participants had an overall improvement in their Job Performance Level following the workshop.

Table 13
Job Performance Evaluation Results: Post-workshop Experience

Level	Definition of Level	n of responses	
		%	#
1	Participant is not involved in providing IL strategies and services for American Indians nor have they identified any.	0	0
2	Participant has identified some general IL strategies and services for American Indians with disabilities.	56	5
3	Participant has identified specific IL strategies for various American Indian cultures within their state.	11	1
4	Participant has identified and implemented specific IL strategies for various American Indian cultures within their state.	11	1
5	Participant has identified and implemented specific IL strategies for various American Indian cultures within their state and there is evidence of an improved quality of life for those served.	22	2

Note: N of responses = 9

DISCUSSION AND CONCLUSIONS

There was an overwhelming interest and appreciation for the culturally oriented presentation, *Corn Pollen Journey for Service Providers,* which granted non-American Indian service providers an opportunity to better understand Native culture when working with American Indian clients. Many participants believed the presenters were very knowledgeable, in particular, American Indians with disabilities who presented on what they had learned and worked through the system in acquiring needed services. Additionally, participants found their dissemination materials, such as the training

workshop manual and information packet, quite helpful and culturally relevant for on going service provision. Also, technical assistance was provided to the participants by the AIRRTC staff during the evaluation process.

Many participants were able to find more reliable contacts through networking than ever before when their Action Plans were applied. Additionally, participants responded that using their Action Plans helped them to become more involved and accountable for their clients, and felt they were contributing more as an IL service provider. Several barriers identified by the participants on their Action Plans involved the lack of transportation and the lack of funds for providing necessary services. Some participants showed revisions to their Action Plans, which was heavily influenced by the training workshop, such as utilizing family support from their client's relatives and supporting their clients for traditional healing methods. Thus, most of the participants showed improvement in their overall level of IL service delivery to American Indians with disabilities.

Some problems did exist during the evaluation process. One of the problems involved participant loss. Other reasons included that several people declined to participate, such as their job responsibilities preventing them from being involved too extensively. In addition, a few of these participants believed that they could not be as effective in the evaluation process, since they had missed much of the cultural awareness core, essential for training IL service providers who work with American Indian clients on the first day of the training workshop. Moreover, several participants had either moved, left their previous job positions and could not be located or they

were IL consumers who lacked the necessary resources to carry out activities needed for action planning.

Finally, in regards to the Post-Job Performance Evaluation, the authors know the reasons why one of the respondents decreased their level of job performance, or why some respondents remained at the same job performance. Some of these participants misunderstood the language used in the evaluation forms, encountered a lack of resources during their action planning, and been in a job position other than an IL counselor (e.g. support staff, administration, volunteer), who do not have the job responsibilities of implementing direct IL services for clients. Additional questions in the Post-Job Performance Evaluation would have clarified increases or decreases in job performance level.

A timeline of follow-up activities was included in the pilot training workshop manual as a guide so that participants would be aware of the estimated completion dates of the follow-up activities (see Appendix J). However, during the evaluation process, many participants reported that time constraints kept them from completing and returning the follow-up evaluation materials in an orderly manner. Since the AIRRTC staff could not disseminate the three- and six-month evaluation packet materials until the one-month evaluation completed packets were returned, the time frame for follow-up activities was prolonged by three months. Originally, a One-month, Three-month, and a Six-month Outcome Report was scheduled to be written.

In summary, participants of the Pilot Training Workshop were able to identify differences among American Indian cultures due to culturally appropriate IL skills

training. Nearly half (n = 11) of the participants were non-Natives, and most of the participants had limited exposure to American Indian cultures. Yet, during the first month of action planning, 16 of the participants returned their Action Plans, utilizing cultural aspects of their tribal consumers. Hence, the first workshop objective had been fulfilled by most participants at applying the knowledge gained from the workshop to their job duties.

The second workshop objective was achieved through comprehensive outreach IL services. According to Action Plan evaluation and personal communication with participants, at least seven participants identified "networking" as a priority with their work, eight participants initiated outreach activities, and six participants implemented collaborative efforts with tribal organizations. In fact, the Navajo Nation Office of Special Education and Rehabilitative Services and the San Juan Center for Independence began a referral network for IL consumers and IL service providers shortly after the end of the workshop.

Lastly, participants had improved their overall level of IL service provision to American Indians with severe or significant disabilities. Nine months after the workshop, there was a 22% (n = 2) increase in the number of participants who were able to identify some general IL strategies. These same participants, prior to the workshop, were unable to identify IL strategies to serve American Indians with disabilities. Furthermore, 22% (n = 2) of the participants enhanced their job performance by identifying and implementing specific IL strategies for American Indian consumers. Overall, at least 44% (n = 4) [but not more than 56% (n = 5)] of the participants showed

an increase in their service delivery level and demonstrated an increase in providing a range of IL services to American Indian consumers. Thus, the third workshop objective was accomplished through these participants who successfully identified strategies related to the IL needs of American Indians with severe or significant disabilities

RECOMMENDATIONS

Developing and conducting the Internet Seminar and Pilot Training Workshop with follow-up evaluations have taught the AIRRTC researchers lessons in meeting the objectives of the research-dissemination project. The following recommendations could be used by researchers or trainers in developing culturally-sensitive curriculum with the goal of developing service strategies in American Indian communities:

1. Solicit representation for the American Indian panel with a broad diversity of tribal affiliations which would better exemplify cross-tribal differences.
2. Commitment from the board or management is needed for the service providers to carry out their responsibilities as outlined in the Action Plan and providing necessary resources to implement the Plan.
3. Outreach strategies identified by service providers that have proven to work, as outlined in the Action Plan, needs to be integrated in the training, policies, and procedures of the organization, Center, or agency.
4. American Indians with disabilities, tribal representatives, and service providers need to work as a team in achieving the goals of American Indians with disabilities.

This includes communicating the expectations and limitations of the independent living strategies.

5. Service providers need to inform, teach, and mentor American Indians with disabilities in communicating advocacy skills especially in a political arena involving the tribal government.

6. To enhance tribal knowledge and cultural sensitivity, service providers need adequate support and commitment from administration, managers, and supervisors, for on-going participation of program staff to attend tribal events and cultural activities.

7. Culturally appropriate independent living plans need to be developed according to the consumer's tribal beliefs. For example, some American Indians with disabilities may request the services of a medicine person, and so, funding should be made available to cover such services.

8. Establish a forum for service providers, consumers, family members, and tribal representatives to share state and tribal resources, tribal values and cultural views on disabling conditions.

9. Disability awareness workshops need to be sponsored on reservations to promote the concept that tribal members with severe or significant disabilities contribute to tribal societies. Through this effort, tribal leaders and community leaders need to develop or support programs with the mission to improve the quality of life for tribal members with disabilities.

10. Future follow-up evaluation or the replication of this study should add an additional question to the Post-Job Performance Evaluation to describe the reasons why a participant might have decreased their level of job performance. Also, another question should ask the participant, if they remained in the same level of job performance and/or if there was any improvement within the same job performance level.

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Appendix A

Pilot Training Workshop Agenda

American Indian Rehabilitation Research and Training Center (AIRRTC)

Institute for Human Development

Pilot Training Workshop
March 13 - 14, 1997

Strategies on Successful Independent Living Services for American Indians with Disabilities

San Juan Center for Independence Conference Room
504 North Main
Aztec, New Mexico
(505) 334-5805

Thursday, March 13, 1997

9:00 a.m. **American Indian Prayer**
Harry D. Yazzie, Procurement Specialist
San Juan Center for Independence, Kirtland, NM

9:15 a.m. **Welcome**
Priscilla Lansing Sanderson, Director
AIRRTC, Northern Arizona University, Flagstaff, AZ
Sherry Watson, Program Director
San Juan Center for Independence, Aztec, NM
Laurey Jaros, Executive Director
Southwest Center for Independence, Durango, CO

9:30 a.m. **American Indian Consumer Panel**
Moderator: Julie Anna Clay, Research Specialist
AIRRTC, NAU, Flagstaff, AZ
Michael Blatchford, Consumer Advocate
Tuba City, AZ
Gleave Isaac, Consumer Advocate
Tonalea, AZ
Kester Tapaha, Fort Lewis College Student
Cortez, CO

10:00 a.m. **Break**

10:30 a.m. **Panel on American Indian Cultural Considerations**
Priscilla Lansing Sanderson, Moderator
Betty Benally, ILP Counselor and Supervisor
Navajo Nation Office of SPED & Rehabilitative Services, Shiprock, NM
Rita A. Lujan, Coordinator
American Indian Vocational Rehabilitation Project
Juanita Beasley Adams
Ute Mountain Ute Tribal Enterprise Employee Assistance Program

11:00 a.m. **Corn Pollen Journey for Service Providers**
Priscilla Lansing Sanderson, Introduction
Hoskie Benally, Cultural Consultant
Waterflow, NM

12:00 p.m. **Lunch on your own**

1:00 p.m. **Corn Pollen Journey (continued)**

2:00 p.m. **Break**

2:30 p.m. **Corn Pollen Journey (continued)**

4:00 p.m. **Adjourn**
Priscilla Lansing Sanderson

Intertribal Co-Sweat (men & women)
Hoskie Benally's residence

Note: Sweat is dependent upon number of participants availability to participate. Will be confirmed at the workshop before 4:00 p.m.

Friday, March 14, 1997
10:00 a.m. **Discussion on Corn Pollen Journey & Cultural Considerations**
Facilitator: Priscilla Lansing Sanderson
Hoskie Benally
Betty Benally
Harry D. Yazzie

11:00 a.m. **Panel on Strategies to Provide Independent Living Services to American Indians with Disabilities**

Moderator: Priscilla Lansing Sanderson
Betty Benally
Rita A. Lujan
Julie Anna Clay
Mike Blatchford
Gleave Isaac

12:00 p.m. **Lunch on your own**

1:30 p.m. **Round Table Discussions on Developing an Action Plan for Improving Communication Methods, Outreach Services, Sharing Community Resources, & Providing IL Services.**

Facilitator: Priscilla Lansing Sanderson

2:15 p.m. **Report to the Group: Blueprint for Action Plan**

Facilitator: Priscilla Lansing Sanderson

2:45 p.m. **Pilot Training Workshop Plans and Evaluation**

Facilitator: Julie Anna Clay

3:00 p.m. **Closing: American Indian Prayer**

Gleave Isaac

Appendix B

Workshop Packet Handouts

Workshop Packet Handouts

- Eight published articles on Native American culture and independent living services, as follows: "Native American Independent Living" by J. Clay; "Improving Outreach to American Indians" by P. Sanderson; "Acknowledging Our Diversity: VR and American Indians" by C. Marshall, S. Johnson, and G. Lonetree; "American Indian VR Services: A Unique Project" by B. D'Alonzo, G. Giordano, and W. Oyenque; "Disabled Navajos Lack Services" by L. Velush; "Overcoming Native Disabilities" by R. Lelito; "The Power of Stories: Native Words and Images on the Internet" by M. Trahant; and "Listen! Native Radio Can Save Languages" by K. Martin.
- "Corn Pollen Journey" by Hoskie Benally
- AIRRTC publications catalog
- AIRRTC brochure

Appendix C

Pre-session Questionnaire

PRE-SESSION QUESTIONNAIRE

1) What is the difference between American Indians residing on Native lands and urban American
Indians?

2) Identify at least three strategies in providing outreach services to American Indians with disabilities.

3) What are the three common barriers identified by American Indians with disabilities in getting
independent living services?

Appendix D

Pilot Training Workshop Evaluation

American Indian Rehabilitation Research and Training Center (AIRRTC)

Pilot Training Workshop
March 13 - 14, 1997
Aztec, New Mexico

Sponsored by: AIRRTC and the San Juan Independent Living Center
and the Southwest Center for Independence

Name (optional):_____

	Poor	Fair	Average	Good	Excellent
1. Please rate each section's format:					
a. American Indian Consumer Panel	1	2	3	4	5
b. Panel on Cultural Considerations	1	2	3	4	5
c. Corn Pollen Journey for Service Providers	1	2	3	4	5
d. Discussion on Corn Pollen Journey and Cultural Considerations	1	2	3	4	5
e. Panel on Strategies to Provide IL services	1	2	3	4	5
f. Round table Discussions on Developing Action Plans	1	2	3	4	5

Comments on format of sections:

2. Relevance of presentations/panels to workshop objective:					
a. American Indian Consumer Panel	1	2	3	4	5
b. Panel on Cultural Considerations	1	2	3	4	5
c. Corn Pollen Journey	1	2	3	4	5

d. Discussion on Corn Pollen Journey and Cultural Considerations	1	2	3	4	5
e. Panel on Provision of IL Services	1	2	3	4	5
f. Round Table Discussions on Developing Action Plans	1	2	3	4	5

Comments on relevance of presentations/panels:

3. Quality of presentation/panel contents:

a. Interesting	1	2	3	4	5
b. Added to understanding	1	2	3	4	5
c. Well-designed	1	2	3	4	5

Comments on quality of presentation panel contents:

4. Quality of workshop activities:

a. Interesting	1	2	3	4	5
b. Added to understanding	1	2	3	4	5
c. Well-designed	1	2	3	4	5
d. Related to overall content	1	2	3	4	5

Comments on quality of presentations, panels, and activities:

5. Presenters' knowledge of topics:

a. Background material	1	2	3	4	5
b. Broad coverage of content	1	2	3	4	5
c. Able to answer questions	1	2	3	4	5
d. Thorough treatment of subject	1	2	3	4	5

Comments on presenters' knowledge of topics:

6. Organization of workshop:

a. Completeness	1	2	3	4	5
b. Clarity and orderliness of structure	1	2	3	4	5
c. Variety of presentation methods	1	2	3	4	5
d. Pacing of presentations	1	2	3	4	5
e. Timing of breaks	1	2	3	4	5

Comments on organization of workshop:

7. Value of printed materials:

a. Relevance	1	2	3	4	5
b. Clarity	1	2	3	4	5
c. Practical applications	1	2	3	4	5
d. Usefulness now	1	2	3	4	5
e. Usefulness in future	1	2	3	4	5
f. Well-designed	1	2	3	4	5
g. Interesting	1	2	3	4	5

Comments on printed materials:

8. Overall value of workshop training to you:

a. Met expectations	1	2	3	4	5
b. Useful now	1	2	3	4	5
c. Quality	1	2	3	4	5
d. Satisfaction	1	2	3	4	5
e. Useful in future	1	2	3	4	5

Comments on your perception of workshop's value:

9. Please rate the workshop location:

a. Location	1	2	3	4	5
b. Facility	1	2	3	4	5
c. Comfort	1	2	3	4	5

Comments on workshop location:

About You . . .

[replies are optional]

10. Discipline/background:

Faculty/Staff O Policy maker O

General public	O	Professional	O
Paraprofessional	O	Student	O
Parent	O	Unknown	O
Person with disability	O	Other _____	O

11. Ethnic origin, for statistical purposes:

African American	O
Anglo/White	O
Asian	O
Mexican American	O
Native American	O
Other _____	O

Appendix E

Participant Reaction Narrative Evaluation

Participant Reaction Narrative Evaluation

1. What did you like most about the seminar?

2. What is your reaction to the seminar methodology?

3. How can the seminar be improved?

4. Two ideas that intrigued you:

5. One idea you will implement immediately:

6. What other seminars would you like us to offer?

Appendix F

Participant Information Form

PARTICIPANT INFORMATION FORM

Name: _____

Title: _____

Organization: _____

Address: _____

City, State, Zip: _____

Telephone: _____

E-mail Address: _____

Alternative Learning Format Needs (e.g., braille, large print, etc.): _____

_____

Voluntary Information

Male	_____
Female	_____
Disability	_____
American Indian	_____
Caucasian	_____
White, Non-Hispanic	_____
African-American	_____
Under Age 65	_____
Age 65 and Over	_____

_____ _____

Signature Date

Appendix G

Action Plan

American Indian Rehabilitation and Research Training Center (AIRRTC)
Pilot Training Workshop

---------- *ACTION PLAN* ----------

During this pilot training workshop provided by the AIRRTC, we will use a planning process called "Action Planning which will enable you to take ideas, information, and materials from the training and implement them in your provision of services to American Indians with disabilities. "Action Planning" is an effective way to take new information and turn it into real changes in the way you provide independent living services.

Time will be allotted during the workshop to write down ideas and outcomes, and to work on your Action Plan. You will leave the training with at least one completed plan that is meaningful and workable. The development and completion of the Action Plan, while you are at the training, enables you to use information from the training to plan for the changes you desire to implement.

"Action Planning" is a four-step process in which you will:

- develop outcomes that describe the results you want to accomplish
- write action steps that need to be followed to accomplish the outcomes
- identify critical people who will be involved in accomplishing each step
- establish dates to begin or accomplish each action step.

An important part of this cultural training you receive through AIRRTC is the discussion of cultural and disability issues in your community with other workshop participants. Your group will identify challenges and ideas related to the topics that we have discussed throughout the training. Your participation in these discussions will assist you in deciding on the outcomes to be included in your Action Plan.

Blueprint for Action Plans

You will work on your Action Plan in groups of three individuals. The groups will be formed at the beginning of the workshop. The purpose of the groups is to provide a way to share ideas, and to develop individual plans that are detailed and realistic. The groups will work together at specified times during the training, with each individual developing their own Action Plan. After taking part in developing each group member's Action Plan, you may decide to keep in touch after the workshop to "check in" and provide the moral support that can be so helpful as we work to implement change.

American Indian Rehabilitation and Research Training Center (AIRRTC)

---------- *ACTION PLAN* ----------

Name:	**Training:**
Date:	**Site:**

Outcome (what do I hope to accomplish?):

	Steps	Who is responsible?	By when?
1.			
2.			
3.			
4.			
5.			
6.			

Resources Needed:

Notes:

Appendix H

One-, Three-, and Six-month Evaluation

Questions for One-month Evaluation

1) Have you completed any of your action plan steps? If so, please describe.

2) Please describe the resources that you have used to complete the steps so far.

3) Do you want to further revise any of the steps in your action plan? If so, how?

4) Please describe any barriers you have encountered while working on your action plan.

How did you overcome these barriers?

5) Please describe the most exciting aspect of your action plan so far.

Questions for Three-Month Evaluation

1) Have you completed any of your action plan steps? If so, please describe.

2) Please describe the resources that you have used to complete the steps so far.

3) Do you want to further revise any of the steps in your action plan? If so, how?

4) Please describe any barriers you have encountered while working on your action plan.

How did you overcome these barriers?

5) Please describe the most exciting aspect of your action plan so far.

Questions for Six-month Evaluation

1) Have you completed any of your action plan steps? If so, please describe.

2) Please describe the resources that you have used to complete the steps so far.

3) Do you want to further revise any of the steps in your action plan? If so, how?

4) Please describe any barriers you have encountered while working on your action plan.

How did you overcome these barriers?

5) Please describe the most exciting aspect of your action plan so far.

Appendix I

Job Performance Evaluation

Participant:_____
Date:_____

Job Performance Evaluation

Please rank yourself at the appropriate level by marking the corresponding box.

Level	Definition of level
Level 1	Participant is not involved in providing IL strategies and services for American Indians nor have they identified any.
Level 2	Participant has identified some general IL strategies and services for American Indians with disabilities.
Level 3	Participant has identified specific IL strategies for various American Indian cultures within their state.
Level 4	Participant has identified and implemented specific IL strategies for various American Indian cultures within their state.
Level 5	Participant has identified and implemented specific IL strategies for various American Indian cultures within their state and there is evidence of an improved quality of life for those served.

Appendix J

Follow-up Evaluation Timeline

FOLLOW-UP EVALUATION BASED ON ACTION PLANS DEVELOPED:

April 14, 1997:	One-month Follow-up Evaluation by Julie Clay, Research Specialist, AIRRTC, NAU
April 21, 1997:	Outcome Report on One-month Follow-up Evaluation to Workshop Participants
June 16, 1997:	Three-months Follow-up Evaluation by Julie Clay
June 23, 1997:	Outcome Report on Three-months Follow-up Evaluation to Workshop Participants
September 15, 1997:	Six-months Follow-up Evaluation Julie Clay
September 22, 1997:	Outcome Report on Six-months Follow-up Evaluation to Workshop Participants
October 3, 1997:	Teleconference Debriefing Meeting with San Juan Center for Independence, Southwest Center for Independence, Navajo Nation OSERS, & other key collaborators, consumers, & service providers
October 13, 1997:	Final report for March 13 - 14, 1997 Pilot Training Workshop
October 31, 1997:	Pilot training manual updated based on follow-up evaluations and outcomes
November 1, 1997:	Pilot training manual to be disseminated to Workshop Participants, CILs, SILCs, Tribal & State VR agencies, RCEPs, etc.

Appendix K

National Project Advisory Committee

National Project Advisory Committee

Greg Brander
Independent Living Specialist
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Pierre, South Dakota

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Independent Living Counselor
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